



A STUDY TO ASSESS THE HABIT OF USAGE OF MOBILE AND ITS EFFECTS ON STUDENT'S BEHAVIOR AMONG ADOLESCENCE AT SELECTED URBAN AREAS OF VIJAYAPUR CITY.

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ABSTRACT

Aims: Assess the habit of usage of mobile and its effects on student's behavior among adolescence.

Materials and methods: Purposive sampling technique was used to select the 300 adolescents. Rating scale was used to assess the habit of mobile usage and behavior of adolescents. Descriptive and inferential statistics was used to analyze the data like mean, median, SD, Frequency, Spearman rank correlation, and chi square test.

Results: The study results shows that 3.33% of adolescents are having poor habit of mobile usage, 31% are having average habit of mobile usage and 65.66% are having good habit of mobile usage. 1.33% are having poor behavior, 35.33% are having average behavior and 63.33% are having good behavior by the adolescents. This is the impact of mobile on adolescents. There is a significant positive correlation between habit of mobile usage and its impact on behavior of adolescents ($r = 0.421$). There is a significance association between gender with habit scores ($X^2=19.89, df=2, p=0.0639$), hours of mobile usage in a day with habit scores ($X^2=30.59, df=6, p=0.0001$), years of mobile usage with habit scores ($X^2=22.35, df=6, p=0.0001$). There is no significant association between age in years with habit scores ($X^2= 5.502, df=2, p=0.0639$). There is a significant association between gender with behavior scores ($X^2=28.61, df= 2, p=0.0001$), hours of mobile usage with behavior scores ($X^2=32.65, df=6, p=0.0001$), years of mobile usage with behavior score ($X^2=19.96, df=6, p=0.0001$), where as no significant association between age in years with behavior score ($X^2=4.445, df=2, p=0.0639$).

Conclusion: The Study concludes that in future many more studies has to be conducted on impact of mobile on different systems of the body, Psychological, social aspects. There is a need for giving awareness on adolescents adverse effect of mobile on health.

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INTRODUCTION

Adolescents are defined as young people between the ages of 10 and 19 years as per WHO (2014) criteria¹ Today, 20% of people persons in the world are adolescents, constituting 1.2 billion people worldwide. Nearly, 243 million adolescents live in India as per the UNICEF Report (2011).²

Addiction is considered by WHO (WHO Expert Committee - 1964) as dependence, as the continuous use of something for the sake of relief, comfort, or stimulation, which often causes cravings when it is absent³ The two major categories of addiction involve either substance addiction, e.g. "drugs or alcohol addiction" or "behavioral addiction such as mobile phone addiction."⁴

Adolescence is a period of greatly enhanced awareness. These years are also the time when mental and psychological development takes place; The adolescents are large in number and are the citizens and workers of tomorrow. This is the time

of exploration of their own and they are more curious in nature. The swiftly changing global conditions are posing a great strain on the young people, modifying their behavior and relationships and excacerbating their health problems.⁵

Any technology is useful if it is properly used .Information technology helps speedy communication. The number of cell phone users is increasing every year. But at the same time the cell phone cause hardship and nuisance to many. The whole world i s gripped by the mobile craze. Whether it is a student, housewife, shopkeeper, rickshawdriver, milkman, professional, rich or poor, almost everyone carries a cell phone in his or her hand. Mobile phone became an essential item for almost all the teenagers. Many of them spend more than six hours a day on their phones in talking, texting or playing games

The extensive use of cell phone makes every one an addict of this small device. Just like every medicine has its side effects, cell phones also have some drawbacks.⁶ Students may disturb

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others through ring tones and they also misuse cell camera. They can use their cell phones to write and send text messages, take and send digital photos, and even take and send short digital video clips, in addition to making phone calls. Nearly all of the uses can become inappropriate and undesirable in middle and high school classrooms. The students even send threatening and vulgar messages to teachers. The increased usage of mobile has increased the magnitude of potential health risks among its users⁷.

Smartphone usage behaviors' e.g. duration of usage and use of mobile phones for accessing Internet are found to be the main risks which can increase likelihood of hazards resulting from mobile phone use. Excessive smartphone use by Indian teens may even damage interpersonal skills of adolescents. Smartphone dependence can cause: (a) Stress (b) anxiety (c) insomnia (d) depression (e) delinquency (f) aggressiveness. Some mobile phone users also run under debt, and that mobile phones can violate privacy, and can harass others as found in USA. Excess of smartphone usage before bed can also cause insomnia, as it was found that the laboratory exposure to 884 MHz wireless signals, components of sleep believed to be important for recovery from daily wear and tear were adversely affected as found in Chicago so Indian adolescents also have similar kind of risk.⁸

Statement of Problem

A study to assess the habit of usage of mobile and its effects on students behavior among adolescence at selected urban areas of Vijayapur city.

Objectives of the Study

- a) To assess the habit of usage of mobile among adolescents
- b) To assess the effect of mobile on adolescence behavior
- c) To assess the correlation between the habit of usage mobile and behavior of the adolescence
- d) To determine the association between habit of mobile usage scores with selected demographic variables
- e) To determine the association of the behavior scores with selected demographic variables

Hypothesis

Hypothesis will be tested at 0.05 level of significance

H₁: There is a significant correlation between habit of mobile usage score with behavior scores

H₂: There is a significant association between the habit of mobile usage score with selected demographic variables

H₃: There is a significant association between behaviour score with selected demographic variables

MATERIAL AND METHODS

Source of data Data will be collected from adolescents of selected urban areas at Vijayapur city

Research Design Non experimental descriptive correlation design will be used

Setting The study will be conducted in selected urban areas at Vijayapur city

Population Population for the study will consists of adolescents in selected urban areas at Vijayapur

Inclusion Criteria

- 1. Boys and girls those who have age between 16 to 19 years.
- 2. Students who give consent for the study.
- 3. Students who are available at the time of study.
- 4. Students who can read and write Kannada & English.

Exclusion Criteria

- 1. Students who are not willing to participate in the study.
- 2. Students who are not available during study period.

RESULTS

Table no 1 Demographic data of adolescents

N=300

S No	Demographic data	Frequency	%
	Age in years		
1	15 to 17	131	43.66
	18 to 19	169	56.33
	Gender		
2	Male	129	43
	Female	171	57
	Do you have your own mobile		
3	Yes	104	34.66
	No	196	65.34
	How many hour do you use mobile in a day		
4	Less than 1 hour	225	75
	1-2 hour	49	16.33
	2-3 hour	18	6
	More than 3 hour	8	2.66
	Since how many years you are using mobile		
5	Since 1 year	164	54.66
	Since 2 year	52	17.33
	Since 3 year	34	11.33
	More than 3 years	50	16.66
	Monthly family income in rupees		
6	<10000	202	67.33
	10001 - 20000	54	18
	20001 - 30000	35	11.66
	>30001	9	3
	Do you have android mobile		
7	Yes	118	39.33
	No	182	60.66
	Occupation of the parents		
	FATHER		
8	Former	169	56.33
	Teacher	39	13
	Govt employee	42	14
	Professional	50	16.66
	MOTHER		
	Former	113	37.66
	Teacher	23	7.66
	govt employee	30	10
	Professional	134	44.66
	Excessive use of mobile harmful to health like		
9	Headache	128	42.66
	Eye irritation	89	29.66
	Chest pain	56	18.66
	Numbness in hand	27	9

The above table describes that 43.66% of adolescents belongs to 15-17 years of age group and 56.33% belongs to 18-19 years of age group. 43% of adolescents are belongs to male gender and 57% are females. 34.66% are having their own mobile where as 65.34% adolescents they are not having their own mobile. 75% adolescents are using less than 01 hour mobile, 16.33% are using 1-2 hour mobile in a day, 6% are

using 2-3hour and 2.66% are using more than 3 hour mobile in a day. 54.66% of adolescents are using mobile since 01 year, 17.33% are using since 02 year, 11.33% are using mobile since 03 year and 16.66% are using mobile since more than 03 year. 67.33% of adolescents are belongs to <10000 monthly family income, 18% belongs to 10001-20000 rupees as family income, 11.66% are belongs to 20001-30000 rupees as a family income and 3% are belongs to >30000 rupees as a family income. 39.33% of adolescents are having android mobile and 60.66% are not having android mobile. 56.33% of adolescents father are farmers, 13% are teachers, 14% are govt employee and 16.66% are professional job where as 37.66% of adolescents mothers are farmers, 7.66% are teachers, 10% are doing govt job and 44.66% are having professional job. 42.66% of adolescents are having headache by using excessive mobiles, 29.66% are having eye irritation, 18.66% are having chest pain and 9% are suffering with numbness in the hand.

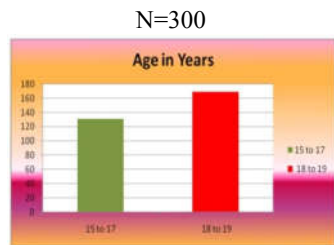


Fig No 1 Simple bar diagram shows that sample distribution according to age in years

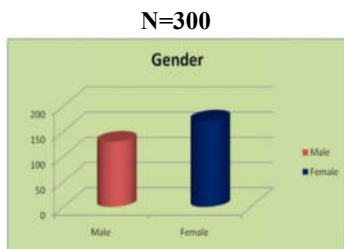


Fig no 2: Cylindrical diagram shows that sample distribution according to gender

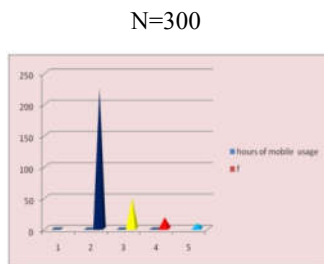


Fig no 3 Cone diagram shows that sample distribution according to number of hours of mobile usage

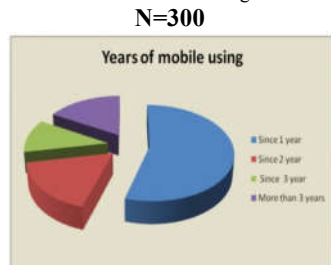


Fig no 4 Split pie diagram shows that sample distribution according to years of mobile usage by the adolescents.

Table No 2 Habit of mobile usage of adolescents N=300

S no	Habit Level	Score level	Frequency	%
1	Poor	27-40	10	3.33
2	Average	14-26	93	31
3	Good	0-13	197	65.66
Total			300	100

The above table depicts that 3.33% of adolescents are having poor habit of mobile usage, 31% are having average habit of mobile usage and 65.66% are having good habit of mobile usage.

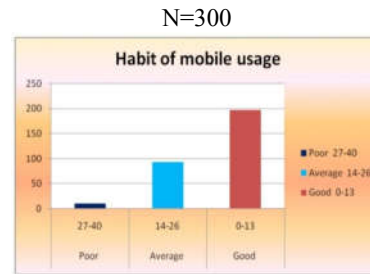


Fig no 5 Simple bar diagram shows that category of habit of mobile usage by the adolescents.

Table no 3 Behavior of adolescents N=300

S no	Behaviour Level	Score level	Frequency	%
1	Poor	37-54	4	1.33
2	Average	19-36	106	35.33
3	Good	0-18	190	63.33
Total			300	100

The above table shows that 1.33% are having poor behavior, 35.33% are having average behavior and 63.33% are having good behavior by the adolescents. This is the impact of mobile on adolescents.



Fig no 6 Cylindrical bar diagram shows that category of behaviour level of adolescents

Table no 4 Correlation between habit scores with behavior score N=300

Variable	Mean	Median	SD	R value	Significance	Remarks
Habit	12.003	11	6.632			Research hypothesis is accepted and null hypothesis is rejected
Behavior	15.93	14	9.536	0.421	S	

The above table describes that There is a significant positive correlation between habit of mobile usage and its impact on behavior of adolescents ($r=0.421$). The mean, median and SD of habit is 12.003 (11) and 6.632 respectively. Whereas mean, median and SD of Behavior is 15.93 (14) and 9.536 respectively.

Table no 5 Association between Habit scores with demographic variables of adolescents
N=300

S No	Demographic data	DF	Chi square	Table value	P Value	Significance	Remarks
1	Age in years	2	5.502	5.86	0.0639	NS	Null hypothesis is accepted and research hypothesis is rejected
2	Gender	2	19.89	5.86	0.0639	S	Research hypothesis is accepted and null hypothesis is rejected
3	Hours of usage of mobile in a day	6	30.59	12.59	0.0001	S	Research hypothesis is accepted and null hypothesis is rejected
4	Years of mobile usage	6	22.35	12.59	0.0001	S	Research hypothesis is accepted and null hypothesis is rejected

The above table depicts that there is a significance association between gender with habit scores ($X^2=19.89$, $df=2$, $p=0.0639$), hours of mobile usage in a day with habit scores ($X^2=30.59$, $df=6$, $p=0.0001$), years of mobile usage with habit scores ($X^2=22.35$, $df=6$, $p=0.0001$). There is no significant association between age in years with habit scores ($X^2=5.502$, $df=2$, $p=0.0639$)

Table no 6 Association between Behavior scores with demographic variables of adolescents
N=300

S No	Demographic data	DF	Chi square	Table value	P Value	Significance	Remarks
1	Age in years	2	4.445	5.86	0.0639	NS	Null hypothesis is accepted and research hypothesis is rejected
2	Gender	2	28.61	5.86	0.0001	S	Research hypothesis is accepted and null hypothesis is rejected
3	Hours of usage of mobile in a day	6	32.65	12.59	0.0001	S	Research hypothesis is accepted and null hypothesis is rejected
4	Years of mobile usage	6	19.96	12.59	0.0001	S	Research hypothesis is accepted and null hypothesis is rejected

The above table explains that there is a significant association between gender with behavior scores ($X^2=28.61$, $df=2$, $p=0.0001$), hours of mobile usage with behavior scores ($X^2=32.65$, $df=6$, $p=0.0001$), years of mobile usage with behavior score ($X^2=19.96$, $df=6$, $p=0.0001$), whereas no significant association between age in years with behavior score ($X^2=4.445$, $df=2$, $p=0.0639$).

CONCLUSION

The study concludes that there is a positive correlation between habit of mobile usage and its impact on behavior of adolescents. The study also found that there is a significant association between some of the demographic variables with habit of mobile usage scores and behavior scores. Some of the adolescents are having health problems like headache, eye irritation, numbness in the hand etc so in future researcher has to concentrate on mobile usage with health problems with large samples and give a mass education programme to give more awareness on adverse effect of mobile on health. In future many more studies has to be conducted on impact of mobile on different systems of the body, Psychological, social aspects. There is a need for giving awareness on adolescents adverse effect of mobile on health.

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